

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # A96000001747

1. Entity Name

PLEASUREDOME YBOR CITY LIMITED PARTNERSHIP

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JUL 10 AM 9:25

Principal Place of Business
1430 EAST SEVENTH AVENUE
TAMPA FL 33605

Mailing Address
1430 EAST SEVENTH AVENUE
TAMPA FL 33605-3610



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1430 E. Seventh Ave.

3. Mailing Address

1430 E. Seventh Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33605

Country

Zip

33605

Country

4. FEI Number

59-3414580

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AVIS, RICHARD T ESQ.
1325 SNELL ISLE BLVD., SUITE 205C
ST. PETERSBURG FL 33704

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions
as Shown on record.

\$370,244.00

10. Amount of Capital Contributions
in FLORIDA to date.

11. MAKE CHECK PAYABLE TO DEPT. OF STATE
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

13. ADDRESS CHANGES ONLY

DOCUMENT # P96000015636
NAME PLEASURE YBOR CITY, INC.
STREET ADDRESS 1430 E. 7TH AVENUE
CITY - ST - ZIP TAMPA FL 33605

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT # P96000101807
NAME CLUB 1430, INC.
STREET ADDRESS 2004 DURHAM STREET
CITY - ST - ZIP TAMPA FL 33605

STREET ADDRESS

CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

STREET ADDRESS

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STREET ADDRESS

CITY - ST - ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: *Michael Hamilton*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

Date

Daytime Phone #

4-27-00 813-247-2711